

**DEPARTMENT OF CORPORATIONS**  
*California's Investment and Financing Authority***THE ESCROW SOURCE, INC.****CLAIM FORM**

**Return the claim form and supporting documents  
to the Department of Corporations  
on or before December 15, 2003**

Date: \_\_\_\_\_

Escrow Number, Check Number or  
Other Reference Number (please specify): \_\_\_\_\_

Dollar Amount Claimed (Do not include interest): \$ \_\_\_\_\_

Name of person(s) or company making claim: \_\_\_\_\_

\_\_\_\_\_

Mailing address and telephone number of person(s) or company making claim:

\_\_\_\_\_

\_\_\_\_\_

Basis for the claim (attach copies of all pertinent documents, such as escrow instructions, closing statement, copy of check, etc):

\_\_\_\_\_

\_\_\_\_\_

I hereby certify under penalty of perjury under the laws of the state of California that this  
information is true and correct.

\_\_\_\_\_

Date

\_\_\_\_\_

Print Name

\_\_\_\_\_

Signature

Return this form and supporting documents on or before December 15, 2003 to:

Department of Corporations  
Louisa A. Broudy, Conservator  
320 W. 4<sup>th</sup> Street, Suite 750  
Los Angeles, CA 90013-2344